

2012 Choices Allowance And Premium Rates

2012 Monthly Benefit Allowance (based on number enrolled in medical coverage)	
Medical waiver	\$244.00
You only	\$659.13
You + 1 family member	\$1,202.61
You + 2 or more family members	\$1,420.66

Medical Plans	You Only	You + 1	You + 2 or More
CIGNA Network HMO	\$520.65	\$1,038.49	\$1,195.80
CIGNA Network POS	\$934.94	\$1,662.69	\$1,744.19
Kaiser	\$552.53	\$1,099.62	\$1,276.43
ALADS Blue Cross Prudent Buyer Basic	\$743.92	\$1,445.72	\$1,662.23
ALADS Blue Cross Prudent Buyer Premier	\$843.48	\$1,545.28	\$1,761.79
ALADS Blue Cross CaliforniaCare Basic	\$502.21	\$972.40	\$1,203.93
ALADS Blue Cross CaliforniaCare Premier	\$601.77	\$1,071.96	\$1,303.49
CAPE Blue Shield Classic POS	\$721.00	\$1,399.00	\$1,666.00
CAPE Blue Shield Lite POS	\$443.00	\$913.00	\$1,140.00
Fire Fighters Local 1014	\$613.00	\$1,164.56	\$1,383.56
Waive coverage			

Dental Plans	You Only	You + 1	You + 2 or More
Delta Dental	\$27.07	\$45.41	\$68.30
DeltaCare	\$14.97	\$24.69	\$36.52
SafeGuard	\$11.42	\$22.06	\$28.77
Waive coverage			

Optional Group Term Life Insurance		
1 x Annual Salary	6 x Annual Salary	Monthly premiums are based on age and salary. The County pays 15% of the monthly premium.
2 x Annual Salary	7 x Annual Salary	
3 x Annual Salary	8 x Annual Salary	
4 x Annual Salary	No coverage	
5 x Annual Salary		

Dependent Term Life Insurance (After-Tax Benefit)		
Coverage (all family members):	\$5,000	\$0.91
	\$10,000	\$1.82
	\$15,000	\$2.74
	\$20,000	\$3.65
No coverage		

AD&D Insurance		
Amount	You Only	You + Family Members
\$ 10,000	\$0.15	\$0.29
\$ 25,000	\$0.38	\$0.73
\$ 50,000	\$0.75	\$1.45
\$ 100,000	\$1.50	\$2.90
\$ 150,000	\$2.25	\$4.35
\$ 200,000	\$3.00	\$5.80
\$ 250,000	\$3.75	\$7.25
No coverage		

Medical Coverage Protection (LTD Health Insurance)	
LTD Health Insurance — 100%	\$3.00

Spending Accounts	
Health Care Spending Account	\$10 minimum to \$400 maximum per month
Dependent Care Spending Account	\$10 minimum to \$400 maximum per month